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CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL E	NTITY	OR	OTHER SMALL E		
FOR NUMBER FILED			R FILED	NUMBER EXTRA			RATE	FEE		RATE	FEE	l.
BASIC FEE (37 CFR 1.16(a))								<u> 3225</u>	OR		<u>:740.9</u>	p
TOTA	L CLAIMS FR 1.16(c))		minus 20	- ·			×გS₌		OR	× 5 0=		ĺ
INDE	PENDENT CLAIM	is	minus 3 =		•		x.100		OR	x: 30 €		
(6) 6) (1) (1) (2)				7 CFR 1.16(d))			+.180		OR	+:360		
				er "0" in column 2	•	TOTAL		OR	TOTAL			
• If the difference in column 1 is less than zero, enter *0* in column 2. CLAIMS AS AMENDED PART II												
(Oatuma 2				(Column 3)		SMALL E	KITITV	OR	OTHER SMALL			
-		(Column 1)	1 3 < 1	(Column 2) HICHHS年 前		 Į: ·	9 35 15 A : T	· · · · · · · · · · · ·	Ten casi			
Ϋ́		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	EXTRA	Ì	.KATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MEI	Total (37 CFR 1.16(c))	16	Minus	"20	=	1	× 3 5=		OR	x : 50-		
ENDMENT	Independent (37 CFR 1.16(b))	. K	Minus	" 3	* 3	1	× : #00		OR	× + 200	400 04	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	+./80	4	OR	+.360	_	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	400	1
		(Column 1)		(Column 2)	(Column 3)				<u> </u>		200 4	30
8 5		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ME	Total (37 CFR 1.16(c))	*	Minus	**	=	1	x. <u>25</u>		OR	x \$50		1
AMENDMENT	Independent (37 CFR 1.16(b))	-	Minus	***	=	1	×:100		OR	× 900		
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					1	+.180		OR	0005.+		
THE FREE TRANSPORT OF MARKET CO. S. C.							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
		(Column 1)		(Column 2)	(Column 3)		•					
υĘ		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
ME	Total (37 CFR 1.16(c))	AMENDMENT	Minus	**	=	7	x : 25=		OR	x 5 0=		
	(37 CFR 1.16(c)) Independent (37 CFR 1.16(b))	•	Minus	***	=	1	×:100		OR	x : <u>3</u> ∞		
AMENDMENT		TATION OF MULTIP	E DEPEND	ENT CLAIM (37 C	FR 1.16(d))	1	+:180		OR	+.360		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		7
	• .If the entry in	column 1 is less th	an the ent	ry in column 2, wr	ite "0" in colum	n 3						1
1 .	** If the "Highest ** If the "Highest	Number Previous Number Previous	y Paid For y Paid For	" IN THIS SPACE " IN THIS SPACE	is less than 20 Is less than 3,	en	ter *3".					-

*** If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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